



COUNTY OF SAN DIEGO

DEPARTMENT OF PLANNING AND LAND USE: Zoning

INITIAL CONSULTATION MEETING REQUEST FORM

Initial Consultation meetings (IC's) are not to review or submit an application package for a discretionary permit. Please contact the Zoning Information Counter (888-267-8770) for assistance in completing discretionary permit applications and to schedule a submittal appointment please call (858-694-2262).

IC's are intended to identify general regulatory constraints for a property and to provide a cursory review of projects for potential issues.

INITIAL CONSULTATION MEETINGS DO NOT SATISFY MANDATORY MAJOR PRE-APP REQUIREMENTS FOR MAJOR PROJECTS.

Requestor's Name: _____ Requestor's Phone: _____

Mailing Address: _____

Requestor's Fax: _____ Email Address: _____

Property Assessor Parcel Number(s): _____ Acres: _____

Property Address/Location: _____

Are you an Attorney or are you bringing an Attorney to the Initial Consultation Meeting? ☐ Yes ☐ No

Are you an Attorney or are you bringing an Attorney and will legal issues be discussed? ☐ Yes ☐ No

Be aware that DPLU Policy requires that a Deputy County Counsel attend meetings where an outside attorney is present. Deputy County Counsel will charge at the hourly rate mentioned below. If you check the "Yes" box, above, change your mind and fail to notify DPLU that you will not bring an attorney, County Counsel charges for preparation and travel (generally 1-2 hours) will still be applied.

REQUESTED COUNTY REPRESENTATIVES AT IC

The DPLU Project Manager will make the final determination of the appropriate representatives based on this request, site constraints, and project features. The requestor is required to pay a DEPOSIT OF \$990 FOR DPLU, Planning. PLEASE BE PREPARED TO PAY ADDITIONAL MONEY FOR EACH INDIVIDUAL.

Yes	No	Issue	Position	Required Deposits/Fees
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Planning/Zoning/Environmental/Codes	DPLU Project Manager	\$990 (D)
<input type="checkbox"/>	<input type="checkbox"/>	Road Improvements/Access/Traffic/Drainage	Land Development Staff	\$550 (D)
<input type="checkbox"/>	<input type="checkbox"/>	Wells/Septic Systems	DEH Specialist	\$238 (F)
<input type="checkbox"/>	<input type="checkbox"/>	Park Land Dedication Ordinance/Trails	DPR Staff	\$90-\$114 per hour
<input type="checkbox"/>	<input type="checkbox"/>	Legal Issues/Interpretations	County Counsel	\$211 per hour

PAYMENT FOR INITIAL CONSULTATION

Deposit is/are required. All charges for Parks & Recreation and County Counsel are due and payable at the conclusion of the meeting. Follow-on assignments will be charged on a time and materials basis and due prior to issuing letters or at the conclusion of the subsequent meetings. Checks are made payable to the "County of San Diego." Two party checks are not acceptable. Visa and MasterCard are also accepted.



ZC033, IC (12/09)

MEETING PURPOSE/PROJECT DESCRIPTION

Explain the purpose of your Initial Consultation meeting request with a written description of your proposed project (include how water, sewer, and access will be obtained) and list specific questions that you would like answered. Please attach additional pages if necessary and an exhibit or plot plan of your proposal if available. If studies are available they may also be submitted to assist staff with their review. **NOTE: PLEASE PROVIDE AS MANY DETAILS REGARDING THE PROJECT AND SITE AS POSSIBLE AS THIS WILL ALLOW FOR STAFF TO PROVIDE MORE DETAILED AND CONSTRUCTIVE FEEDBACK.**

PLEASE PROVIDE AT LEAST FIVE (5) COPIES OF ANY ATTACHMENT.

MEETING REQUEST SUBMITTAL

Please return this form and attachments, if any, to: Zoning, Attn: Lisa Robles, Department of Planning and Land Use, 5201 Ruffin Road Suite B, San Diego, California 92123-1666 or via e-mail to: Lisa.Robles1@sdcounty.ca.gov.

Initial Consultation Meetings generally take place within 4 weeks from receipt of this form. The lead planner to whom the pre-app is assigned will contact the pre-app requestor generally within 10 working days of receipt of this form to schedule the meeting.

FINANCIALLY RESPONSIBLE PARTY

I, the undersigned, as financially responsible person for the IC meeting, understand that I must pay the required deposit to "COUNTY OF SAN DIEGO" for the Initial Consultation meeting when my request is submitted. I understand that if I arrive for a meeting without payment of the required deposit, the meeting will be rescheduled.

Name (if different from Requestor): _____

Mailing Address: _____

Phone Number: _____ Email Address: _____

Date

Signature (**Required**)

FOR STAFF USE ONLY

KIVA Pre-App #: _____ Student Intern: _____

Project Manager: _____ Planning Manager: _____